

MEDICAID ADVISORY COMMITTEE

May 4, 2021

10:00 a.m. – 12:00 p.m. CST

Zoom

Attendees

Bill Snyder, Sam Hynes, Lori Langdeaux, Lynn Kaufmann, Christine Olsen, Caitlin Cleary, Jason Wickersham, Mark Burket, Erik Nelson, Matthew Ballard, Belinda Nelson, Karli Williams, Tiffany Wolfgang, Misty Black Bear, Michelle Baack, Anja Aplan, Eric Grocott

Welcome and Introductions

Bill Snyder, Director of the Division of Medical Services, welcomed those in attendance. Participants introduced themselves. Bill announced that there will be two new people on the committee that will be appointed by Secretary Laurie Gill.

Review Minutes

Minutes from the November 2020 meeting can be found on the [Medicaid Advisory Committee webpage](#). Bill provided updates on items discussed during the last meeting.

HOPE Waiver Renewal

Caitlin Cleary provided an overview of the HOPE waiver for the committee as well as went over proposed changes to the HOPE waiver renewal. There are approximately 2,300 people that receive services through the HOPE Waiver each year. The waiver is in place to help people stay out of institutional settings and remain in their home community. Additional information on the HOPE waiver and how to access services can be found on the [DHS website](#) or through [Dakota At Home](#).

Every five years Long Term Services and Supports (LTSS) is required to renew the HOPE waiver with CMS. LTSS has to have the waiver submitted to CMS in June 2021, the waiver effective date will be October 2021. A summary of the changes LTSS is making to the waiver can be found on the [Medicaid Advisory Committee webpage](#). LTSS has looked into adding self-directed services to the waiver. Before pursuing this LTSS plans to survey recipients to gauge if there is interest in adding a self-direction option to waiver services in the future.

Erik Nelson asked for more information about the survey LTSS is planning. LTSS Specialists will ask recipients about their interest in self-directing their services. They want to gauge interest before going through the process of making significant changes to the waiver.

Eric Grocott asked about asked about the process for getting incontinence supplies since LTSS is no longer authorizing the supplies. Providers can check recipient eligibility information as well as the recipients limit for incontinence supplies through the Medicaid portal. LTSS reviews and authorizes services if a recipient needs to go over the service limit for incontinence supplies. Eric also asked if there was a way for the provider to be notified if a recipient was getting close to reaching the limit. All the waivers provide notification to providers in a different way. For LTSS there is a staff person who is monitoring incontinence supplies and will reach out to providers

when a recipient is close to reaching the limit. There is additional information on the provider [communication page](#) regarding incontinence supplies.

Lynn Kaufman asked when LTSS Specialists will be going back into the home to do assessments with recipients. Specialist started doing home visits with recipients again on April 1. Recipients have the option of meeting in person or virtually.

Bill provided a brief overview of the other three HCBS waivers.

State Plan Amendment Report

Matthew Ballard provided an overview of state plan amendments since the last meeting. A complete list of state plan amendments can be found on the [Medicaid Advisory Committee webpage](#).

Michelle Baack asked for more information on the career connector 1115. Matthew explained that the career connector 1115 waiver would create a work requirement for Medicaid and that it would assist people to enter to the workforce or to achieve education goals. Erik Nelson asked if there were updates on the 1115 waiver approval with the change in administration. The Biden administration has signaled that they are not supportive of work requirement waivers. The Biden administration has revoked previously approved 1115 waivers with work requirements in other states. CMS has not taken any action or provided any additional communication regarding South Dakota's career connector 1115 waiver. Erik Nelson asked if there were any updates on current participation. Current participation in the career connector program is voluntary, participation is steady, but utilization is low.

Other Medicaid Updates

CHART Opportunity

Matthew Ballard updated the group on South Dakota's intention to apply for the Community Health Access and Rural Transformation (CHART) Model federal grant opportunity. The grant works with states to implement an alternative payment methodology for selected rural providers. Medicaid is applying for this opportunity as a lead agency. The award is for \$5 million over a 7-year period. It would allow South Dakota to implement capitated payments for both Medicare and Medicaid for participating rural hospitals. In addition to the capitated payments, the model also assists states to implement a health transformation plan which will work to increase access to specialty care, assist patients to manage chronic conditions, and increase use of telemedicine. We have received interest from facilities in Brown county and in the Black Hills. Additional information can be found on the [DSS chart website](#).

Michelle Baack commented that this sounds like a good opportunity for the state and should increase access to care. Michelle asked if we know who else is applying. Medicaid does not know who else might be applying. There is not any public information regarding the number of applicants.

Well-Child Resources and Child Care Collaboration

During the last MAC meeting it was suggested that we collaborate with childcare providers to get messaging out encouraging parents to take their children in for their well child visit and vaccinations. DSS and DOH have collaborated to put together a brochure that can be sent to a variety of providers. Approximately 25,000 brochures are being sent to childcare providers and foster care providers. The resources are free for anyone to use. They can be ordered from the

[DSS website](#). In addition to the print materials DSS has created a social media tool kit. The tool kit includes infographics and text regarding well-child visits and vaccinations. The social media toolkit can be found on the [Medicaid Well-Child webpage](#).

High-Cost Claim Review

Bill reported on Medicaid high-cost claims. DSS closely monitors Medicaid expenditures. Over the last year the number of high-cost claims has increased. The high-cost claims have been reviewed and it has been determined that the increase in high-cost claims is not COVID-19 related. We are working with a contractor to review high-cost claims. This review will consist of a review of both in-state and out-of-state claims.

Legislative Session

Bill provided an overview of the 2021 legislative session. During session the legislature approved inflationary increases for Medicaid providers, the inflation is 2.4% for most services, there are some exceptions where we cannot increase a rate due to federal regulations. DSS brought forward a bill SB7 this session. The bill allows Medicaid to be awarded restitution in criminal cases.

Recovery Audit Contractor Exemption

South Dakota received a two-year extension on the recovery audit contractor (RAC) exemption. Having a RAC is a requirement of CMS. The RAC selects claims to audit as well as medical records. They audit if a claim was paid appropriately. If it was overpaid, they will ask for money back. South Dakota Medicaid has a high payment accuracy and as a result we have a long standing exemption from this recovery audit requirement. We are glad to see this extended for 2 more years.

COVID-19/ Public Health Emergency Update

The federal PHE was extended again until July 21, 2021. It is extended in 90 days increments. The federal government has indicated that the PHE will likely be extended through the end of 2021.

Vaccines are being provided to providers by the federal government at no cost. Medicaid reimburses the administration of the vaccine.

Belinda Nelson asked if the extension to the PHE impacts the ability for mental health providers to continue to provide services via telephone. Tiffany Wolfgang explained that there is an executive order in place which provided the flexibility to provide behavioral health services via telephone. If the executive order is not extended, then that flexibility will expire in June. Tiffany explained that Behavioral Health is working with Medical services to see what needs to be done to make some of these COVID flexibilities permanent.

Erik Nelson asked about vaccine marketing for the COVID-19 vaccine and if Medicaid has done any specific marketing for the vaccine. DOH has been on point for marketing to individuals. We have focused on communication to providers regarding vaccine reimbursement.

Eric Grocott asked if we have any data on Medicaid COVID-19 vaccine administration, and the number of people that have received the vaccine. Medicaid has seen about 2,000 covid vaccine administration claims every month. There was a follow-up question regarding the number of vaccines administered in the 16-18 age range. Medicaid did not have the data regarding that age group readily available.

Maternal Health Update

Medicaid and the DOH Division of Maternal Child Health have worked together to submit an application for a National Academy for State Health Policy (NASHP) two-year policy academy focused on maternal mortality. South Dakota was one of eight states selected to participate in the policy academy. Our team over the next two years will be looking at things like value-based payment arrangements, and maternity medical homes, that would continue to increase the quality and accessibility of maternal health services.

Michelle Baack asked for some additional information about the policy academy and what the focus is. Information about the policy academy can be found on the [NASHP website](#).

Get to Know Medical Services Staff

Anja Aplan introduced herself and provided an overview of her role within the Division of Medical Services.

Public Input

There was no additional public input.

Plan Next Meeting Date

The next meeting will be held on November 2 at 10am. The Committee indicated they would like a Medicaid 101 at the next meeting.